2003 NOT-FOR-PROFIT CORPORATION

Apr 24, 2003 8:00 am § Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # **N9900000363** 04-24-2003 90242 044 ****61.25 VILLAGE REFORM CONGREGATION, INC. Principal Place of Business Mailing Address 550 S.W. 137TH-AVE., STE.L-401 550 S.W. 137TH-AVE..STE.L-401 PEMBROKE PINES FL 33027 PEMBROKE PINES FL 33027 2. Principal Place of Business 5 U 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 65-0893990 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Г Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAILEANU, JORDAN D Street Address (P.O. Box Number is Not Acceptable) 550 S.W. 137TH AVE., STE.L-401 PEMBROKE PINES FL 33027 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be E FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change Addition TITLE Delete TITLE RAILEANU, JORDAN D NAME NAME STREET ADDRESS 550 S.W. 137TH AVE., STE.L-401 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33027 TITLE ☐ Delete TITLE ☐ Change Addition MARSHALL, ERWIN NAME 12500 S.W. 6TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL 33027 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition COHEN, PAUL NAME NAME STREET ADDRESS STREET ADDRESS 900 S.W. 142ND. AVE. CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33027 ☐ Addition TITLE ☐ Delete WILLNER, LIBBY NAME NAME 701 SW 142ND AVE S212 STREET ADDRESS STREET ADDRESS PEMBROOKE PINES FL 33027 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE FRIEDMAN, ALBERT NAME STREET ADDRESS STREET ADDRESS 1200 SW 125 AVE CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33027 VICE PRESIDEN LEVIN, MERWYN Addition ☐ Delete TITLE Change NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

2601

SW

PEMBROKE PINES, FL

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED